

APPLICATION FOR BIRTH CERTIFICATE

MAIL TO: City of Hartford, Bureau of Vital Records
550 Main Street, Hartford, CT 06103

Please include a clear copy of a photo ID plus a copy of one of the following:
Social Security Card, Employment ID, State or City ID

I am applying for the birth certificate of:

Full Name at birth: _____

Date of Birth: _____

Place of Birth _____
(Town) (Hospital or Street & Number)

Information on Above Person's Family

Father's Full Name _____

Mother's Full Maiden Name _____

Father's Place of Birth _____ Mother's Place of Birth _____

Information on Person Making This Application

Name (Please Print) _____

Written Signature _____

Address _____

If not applying for your own certificate, indicate whether you are a parent or legal guardian _____

Proof of guardianship is required.

Mailed-In Written Request

Include this form (completely filled out), copies of the IDs indicated, a self addressed stamped envelope, and a check or money order made payable to the City of Hartford. Copies are \$5 each.

Faxed Written Request

Include this form (completely filled out), copies of the IDs indicated, your credit card number, type of card, expiration date. The fees are \$5.00 per certificate plus \$5.00 for shipping and handling for regular mail. Federal Express overnight fee will apply if requested.

Mark here if you wish certificate sent Federal Express _____

Credit Card type _____ Expiration Date _____

Credit Card # _____

Signature as name appears on Credit Card _____

Attach clear copy
Of
Photo Identification
Here